

FEC FORM 5

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REPORT OF INDEPENDENT EXPENDITURES MADE AND CONTRIBUTIONS RECEIVED**To Be Used by Persons (Other than Political Committees) including Qualified Nonprofit Corporations**

1. (a) Name of Individual, Organization or Corporation LEAGUE OF CONSERVATION VOTERS INC		3. FEC Identification Number <div style="border: 1px solid black; padding: 2px; display: inline-block;"> C C90005786 </div>			
(b) Address (number and street) <input type="checkbox"/> check if different than previously reported 1920 L STREET NW #800					
(c) City, State and ZIP Code WASHINGTON DC 20036					
2.	Corporate filers only Is the filer a qualified nonprofit corporation? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No				
<table style="width: 100%; border: none;"> <tr> <td style="width: 5%; border: none;">Individual filers only</td> <td style="border: none; width: 60%;">Name of Employer</td> <td style="border: none; width: 35%;">Occupation</td> </tr> </table>			Individual filers only	Name of Employer	Occupation
Individual filers only	Name of Employer	Occupation			

4. TYPE OF REPORT (check appropriate boxes):

- (a) ☐ April 15 Quarterly Report ☐ 24-Hour Report ☒ 48-Hour Report
- ☐ July 15 Quarterly Report
- ☐ October Quarterly Report
- ☐ January 31 Year-End Report

(b) Is this Report an amendment? Yes ☒ No ☐

5. COVERING PERIOD: FROM

M M
1 1

D D
0 9

Y Y Y Y
2 0 0 7

THROUGH

M M
1 1

D D
1 6

Y Y Y Y
2 0 0 7

6. TOTAL CONTRIBUTIONS

.00

7. TOTAL INDEPENDENT EXPENDITURES.....

63514.50

Under penalty of perjury, I certify that the independent expenditures reported herein were not made with the cooperation or prior consent of, or in constitution with, or at the request or suggestion of, a candidate or a candidate's agent or authorized committee or a political party committee or its agent. In addition, if the independent expenditures reported herein were made by a corporation, I certify that the corporation is a qualified nonprofit corporation under the Commission's regulations.

TYPE OR PRINT NAME OF PERSON COMPLETING FORM

SIGNATURE

DATE

Barbara Gonzalez-McIntosh

11/27/2007

NOTE: Submission of false, erroneous or incomplete information may subject the person signing this report to the penalties of 2 U.S.C. 437g.

For further information, contact:

Federal Election Commission, 999 E Street, N.W., Washington, D.C. 20463 Toll Free 800-424-9530, Local 202-694-1100

SCHEDULE 5-E
ITEMIZED INDEPENDENT EXPENDITURES

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FOR LINE 7 FOR FORM 5

NAME OF FILER (In Full)

LEAGUE OF CONSERVATION VOTERS INC

Full Name (Last, First, Middle Initial) of Payee
Direct Response Group

Date

M	M	/	D	D	/	Y	Y	Y	Y
1	1		1	4		2	0	0	7

Mailing Address
2401 W. Behrond Drive
Suite 7

Amount

63514.50

City	State	Zip Code
Phoebuz	AZ	85027

Purpose of Expenditure
TV Ad- NO IntroductionCategory/
Type 004Office Sought: ☒ House State: MD
House ☐ Senate District: 01
☐ PresidentName of Federal Candidate Supported or Opposed by Expenditure:
Wayne T. GilchrestCheck One: ☒ Support ☐ OpposeCalendar Year-To-Date Per Election
for Office Sought 123349.00Disbursement For: ☐ Primary ☐ General☐ Other (specify)

(a) SUBTOTAL of Itemized Independent Expenditures

63514.50

(b) SUBTOTAL of Unitemized Independent Expenditures

(c) TOTAL Independent Expenditures
(carry total from last page forward to Line 7)

63514.50